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CONFIRMATION NO. 4433

<b>SERIAL NUMBER</b> 10/528,411	<b>FILING OR 371(c) DATE</b> 11/10/2005 <b>RULE</b>	<b>CLASS</b> 128	<b>GROUP ART UNIT</b> 3771	<b>ATTORNEY DOCKET NO.</b> 55320.001001
<b>APPLICANTS</b> Poul Boelt, Jyllinge, DENMARK;				
<b>** CONTINUING DATA *****</b> <i>KCM</i> This application is a 371 of PCT/DK03/00605 09/18/2003				
<b>** FOREIGN APPLICATIONS *****</b> <i>KCM</i> DENMARK 2002-01372 09/18/2002				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 07/31/2006</b>				
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Verified and <i>KCMatter</i> <i>KCM</i> Acknowledged Examiner's Signature Initials		<b>STATE OR COUNTRY</b> DENMARK	<b>SHEETS DRAWING</b> 4	<b>TOTAL CLAIMS</b> 22
		<b>INDEPENDENT CLAIMS</b> 2		
<b>ADDRESS</b> 21967				
<b>TITLE</b> Pressure reducing device				
<b>FILING FEE RECEIVED</b> 1130	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	